COMPLIANCE WITH STATEMENT OF BENEFITS REAL ESTATE IMPROVEMENTS

CONFIDENTIAL

PAY 20

FORM CF-1 / Real Property

State Form 51766 (R3 / 2-13) Prescribed by the Department of Local Government Finance

PRIVACY NOTICE

The cost and any specific individual's salary information is confidential; the balance of the filing is public record per IC 6-1 1-12 1-5 1 (c) and (d).

MAY 1 5 2019

INSTRUCTIONS:

This form does not apply to property located in a residentially distressed area or any deduction for which the Statement of Benefits was approved before July 1, 1991.

Property owners must file this form with the county auditor and the designating body for their review regarding the compliance of the project with the Statement of Benefits (Form SB-1/Real Property).

This form must accompany the initial deduction application (Form 322/RE) that is filed with the county auditor.

This form must also be updated each year in which the deduction is applicable. It is filed with the county auditor and the designating body before May 15, or by the due date of the real property owner's personal property return that is filed in the township where the property is located. (IC 6-1.1-12.1-5.1(b))

With the approval of the designating body, compliance information for multiple projects may be consolidated on one (1) compliance form (Form CF-1/Real Property).

TAXPAYER INFORMATION SECTION 1 County Name of taxpayer Pyrolyx USA Indiana, LLC Vigo DLGF taxing district number Address of taxpayer (number and street, city, state, and ZIP code) 84-002 4023 Kennett Pike #50036, Wilmington, DE 19807 Telephone number Name of contact person (302) 295-1370 Thomas Redd LOCATION AND DESCRIPTION OF PROPERTY SECTION 2 Estimated start date (month, day, year) Name of designating body 8 08/01/2017 Terre Haute City Council Actual start date (month, day, year) Location of property 08/21/2017 4150 E. Steelton Avenue, Terre Haute, IN 47805 Estimated completion date (month, day, year) Description of real property improvements 01/01/2019 Construction of a 60,000 square foot manufacturing facility Actual completion date (month, day, year) 08/21/2019 (est.) **EMPLOYEES AND SALARIES SECTION 3** AS ESTIMATED ON SB-1 ACTUAL **EMPLOYEES AND SALARIES** 17 Current number of employees \$2,100,000 \$881,760 Salaries 0 0 Number of employees retained \$0 \$0 Salaries Number of additional employees 55 17 \$2,100,000 \$881,760 Salaries **COST AND VALUES SECTION 4 REAL ESTATE IMPROVEMENTS** COST AND VALUES ASSESSED VALUE COST AS ESTIMATED ON SB-1 \$0 Values before project \$2,300,000 Plus: Values of proposed project \$0 Less: Values of any property being replaced \$2,300,000 Net values upon completion of project COST ASSESSED VALUE ACTUAL \$0 Values before project Plus: Values of proposed project \$815,000 Less: Values of any property being replaced \$0 \$815,000 Net values upon completion of project WASTE CONVERTED AND OTHER BENEFITS PROMISED BY THE TAXPAYER SECTION 5 AS ESTIMATED ON SB-1 ACTUAL WASTE CONVERTED AND OTHER BENEFITS 88,000,000 0 Amount of solid waste converted Amount of hazardous waste converted Other benefits: The tackity will produce raw materials used in the rubber and plastics Industries in and around Terre Haute TAXPAYER CERTIFICATION **SECTION 6** I hereby certify that the representations in this statement are true. Dale signed (month, day, year) Moty 15, 2019 Signature of authorized representative Manager Momus

									《								×6				
														* 1.00 (1.00) (1.							
											All Annual Control of the Control of										
The state of the s								1 1 1 1 1 1 1 1 1 1													
																		A STATE OF THE STA			
				· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·							D. A. Sandari, L. Martin, M. Mar						************************************		



STATEMENT OF BENEFITS **REAL ESTATE IMPROVEMENTS**

State Form 51767 (R6 / 10-14)

Prescribed by the Department of Local Government Finance

This statement is being completed for real property that qualifies under the following Indiana Code (check one box): ☐ Redevelopment or rehabititation of real estate improvements (iC 6-1.1-12.1-4)
☐ Residentially distressed area (iC 6-1.1-12.1-4.1)

20_ ___ PAY 20_ FORM SB-1 / Real Property

PRIVACY NOTICE

Any information concerning the cost of the property and specific salarios paid to individual amployous by the property owner is confidential per IC 6-1.1-12.1-5.1.

- INSTRUCTIONS:

 1. This statement must be submitted to the body designating the Economic Revitelization Area prior to the public hearing if the designating body requires information from the applicant in making its decision about whether to designate an Economic Revitelization Area. Otherwise, this statement must be submitted to the designating body BEFORE the redevelopment or rehabilitation of real property for which the person wishes to claim a deduction.

 2. The statement of benefits form must be submitted to the designating body and the area designated an economic revitelization area before the initiation of the redevelopment or rehabilitation for which the person desires to claim a deduction.

 3. To obtain a deduction, a Form 322/RE must be filed with the County Auditor before May 10 in the year in which the edition to assessed valuation is made or not later than thirty (30) days after the assessment notice is malfed to the property owner if it was mailed after April 10. A property owner who failed to file a deduction application within the prescribed deadline may file on application between March 1 and May 10 of a subsequent year.

 4. A property owner who files for the deduction must provide the County Auditor and designating body with a Form CF-1/Real Property. The Form CF-1/Real Property should be attached to the Form 322/RE when the deduction is first claimed and then updated ennually for each your the deduction is applicable.

 5. For a Form SB-1/Real Property that is approved after June 30, 2013, the designating body is required to establish an abatement schedule for each deduction allowed. For a Form SB-1/Real Property that is approved prior to July 1, 2013, the abatement schedule approved by the designating body

deduction ellower remains in effect.		i Proberty inal is abbrosed by												
SECTION 1 Name of toxpayer Pyrolyx USA I	ndiana, LLC	TAXPAY	ER INFORMAT	ION										
Address of texpayer (nu	imber and street, city, state, a	กส ziค ๑๑๑) nington, DE 19807												
Name of contact person		E-meil addross tomr@reklalm.com												
Thomas H. Re	Thomas H. Redd (302) 295-1370													
SECTION 2		LOCATION AND DESCR	IPTION OF PR	OPOSED PRO)JECT									
Namo of designating bo						Resolution n	odmu G							
Location of property	Terre Haute City Council													
Fort Harrison	Rueinace Park		County			DLGF taxing district number 84-002								
		oment, or rohabitation (use addition	1 -	ossory)			an date (month, day, year)							
	,000 square foot manufa		August 1, 2017											
	•						mple/ion date (month, day, year)							
						January	/ 1, 2019							
SECTION 3	ESTIMA'	ie of employees and sa	LARIES AS RI	SULT OF PRO	OPOSED PR	OJECT :								
Current number	Salaries	Number retained	Salaries		Number add	lano)#i	\$2,100,000.00							
0.00	\$0.00	0.00	\$0.00		55.00		\$2,100,000.00							
SECTION 4 ESTIMATED TOTAL COST AND VALUE OF PROPOSED PROJECT														
					AL ESTATE I	IMPROVEMENTS ASSESSED VALUE								
				COST		ACCOSTO TALOE								
Current values	was of assessed protect						2,300,000,00							
	ues of proposed project properly being replaced						0.00							
	res upon completion of pr	······································					2,300,000.00							
SECTION 5	WA	STE CONVERTED AND OT	ER BENEFIT	PROMISED I	BY THE TAX	YAYER								
MANAGEMENT OF THE PARTY OF THE		,												
	uste converted (pounds)	00,000,000.00	Esumate	d hazardous v	vaste convent	on (bonnos)								
Other bonefils	000 000	lid waste converted in seci	ion E io an on	nual aelimate										
Anticipated pow p	os io zonibod ouot,ooo. areonal proparty lovae	ilment of \$22,500,000.00.	rit vilenoitibA	a facility will r	z. produce raw	materials u	ised in the rubber and							
Allicipated new p	ersonal property invos fith ha naiteanl edit has	s facility in Terre Haute wi	l fudher bene	fit the concer	tration of pl	astics manu	ufacturers in and							
around the comm		b identy it for of taken in		-11										
dibana are commi	~);													
SECTION 6		TAXPAYER	CERTIFICATI	ON										
I hereby certify the	hat the representations	s in this statement are true	•											
Signature of authorized	reprosoniativo	1.11			,,		(month, day, year)							
166	11 1	RENO[101016	4 28 2017							
Printed name of authoriz				Title										
Thomas H. Re	ad			Manager										